

NURSING SHORTAGE REDUCTION ACT OF 1987

JULY 28 (legislative day, JUNE 23, 1987).—Ordered to be printed

Mr. KENNEDY, from the Committee on Labor and Human Resources, submitted the following

REPORT

[To accompany S. 1402]

The Committee on Labor and Human Resources to which was referred the bill (S. 1402) to amend title VIII of the Public Health Service Act to establish programs to reduce the shortage of professional nurses, having considered the same, reports favorably thereon with amendments and recommends that the bill as amended do pass.

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I. SUMMARY OF THE BILL

As reported by the Committee, S. 1402 amends title VIII of the Public Health Act to establish a new Part D—Initiatives to Reduce Nursing Shortages. The bill directs the Secretary to establish a special advisory committee consisting of representing of professional nursing organizations, other health care professional organizations, hospitals and other health care providers, and experts in rural health care to develop a comprehensive plan specifying long-term solutions to the problems experienced by hospital and other health care institutions in recruiting and retaining professional nurses.

The bill authorizes a grant to a nonprofit private entity for a project to demonstrate and evaluate innovative hospital nursing

practice models designed to reduce vacancies in hospital nursing positions and to make the hospital nursing position a more attractive career choice.

The bill authorizes grants to and contracts with collegiate schools of nursing to demonstrate and evaluate innovative nursing practice models related to the provisions of long-term care in the home or in long-term care facilities.

The bill authorizes grants and contracts for the development, establishment, and operation of one to five regional model professional nurse recruitment centers for the purpose of recruiting individuals to enter education programs to train professional nurses.

II. BACKGROUND AND NEED

About 83 percent of the hospitals in the United States had vacancies for registered nurses (RNs) during 1986, a recent survey reports. The survey, conducted by the American Organization of Nurse Executives, found that, although some regions of the country are harder hit than others, every State showed a shortage of full-time RNs. The vacancy rate for RNs working in acute care facilities more than doubled between 1985 and 1986, going from 6.5 percent to 13.6 percent. Hospitals report particular difficulty in attracting RNs to high-stress jobs, with two-thirds of those surveyed reporting that it took more than 60 days to fill medical/surgical, emergency, surgical and psychiatric nursing positions and 90 percent reporting 60-day delays in recruiting intensive care nurses. Hospital administrators trying to hire nursing personnel are increasingly having to travel to such foreign countries as Canada, Ireland, the United Kingdom, Australia, and the Philippines to recruit English-speaking nurses to fill their personnel needs.

In the past, one of the chief reasons for nursing shortages was the large number of nurses who were no longer working in the profession; one of the major ways to deal with shortages was to lure these non-practicing nurses back into the health care field. Current statistics, however, show that the number of non-practicing RNs are decreasing. In 1977, for instance, there were 1.4 million RNs in the U.S., and only 70 percent of them were working in nursing; in 1984, there were 1.9 million RN's and nearly 80 percent were working in the field.

Declines in nursing school enrollments over the past 5 years are a matter of great concern. Since 1982 enrollments have dropped significantly and there is no indication that the end of this decline is in sight. The American Association of Colleges of Nursing reports that in the last year, enrollments in baccalaureate nursing programs decreased by 12.6 percent, and from 1984 to 1986, nursing school enrollments decreased by 17.6 percent. Projections indicate that by 1990, the demand for college-trained RNs will exceed the supply by 390,000; by the end of the century, the gap could grow to over a million. The decline in nursing school enrollments has led to the closing of many nursing education programs, including some major university nursing schools.

Nurse training programs authorized under title VIII of the PHS Act have provided Federal support for nursing schools and students since 1964. Currently, title VIII provides support to institutions for

advanced nurse training programs and for nurse practitioner/nurse midwife programs. Federal assistance is also available under title VIII for special projects, demonstration projects, professional nurse traineeships, and nurse faculty fellowships. General scholarships and capitation grants to institutions, which were an integral part of title VIII during its early history, no longer exist. Since 1974, Administration budgets have proposed substantial cuts in funding for nursing education.

III. TEXT OF THE BILL AS REPORTED

A BILL To amend title VIII of the Public Health Service Act to establish programs to reduce the shortage of professional nurses

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the "Nursing Shortage Reduction Act of 1987".

ESTABLISHMENT OF PROGRAM

SEC. 2. Title VIII of the Public Health Service Act is amended by adding at the end and thereby the following new part:

"PART D—INITIATIVES TO REDUCE NURSING SHORTAGES

"ADVISORY COMMITTEE

"SEC. 861. The Secretary shall establish a special advisory committee to develop a comprehensive plan which specifies long-term solutions to the problems experienced by hospitals and other health care institutions in recruiting and retaining professional nurses. Such committee shall consist of representatives of professional nursing organizations, other health care professional organizations, hospitals and other health care providers, and experts in rural health care. Representatives of hospitals and other health care providers on such committee shall include nurses.

"INNOVATIVE HOSPITAL NURSING PRACTICE MODELS

"SEC. 862. (a) The Secretary shall make a grant to a nonprofit private entity with a demonstrated record in supporting innovative health initiatives for a project to demonstrate and evaluate innovative hospital nursing practice models designed to reduce vacancies in hospital nursing positions and to make the hospital nursing position a more attractive career choice. Models demonstrated and evaluated under a grant under this section shall include initiatives to—

"(1) restructure the role of the hospital nurse, through changes in the composition of hospital staff and through innovative approaches for interaction between hospital administration and nursing personnel, in order to ensure that the particular expertise of nurses is efficiently utilized and that nurses are engaged in direct patient care during a larger proportion of their work time;

"(2) test innovative wage structures for nurses in order to—

"(A) reduced vacancies in work shifts during unpopular work hours; and

"(B) provide financial recognition based upon experience and education; and

"(3) evaluate the effectiveness of providing benefits for nurses, such as pensions, sabbaticals, and payment of educational expenses, as a means of developing increased loyalty of nurses to health care institutions and reducing turnover in nursing positions.

"(b) The Federal share of the costs of the project supported with a grant under this section shall not exceed 50 percent.

"(c) For a grant under this section, there are authorized to be appropriated \$2,000,000 for each of the fiscal years 1988, 1989, and 1990.

"LONG-TERM CARE NURSING PRACTICE DEMONSTRATION

"SEC. 863. (a) The Secretary shall make grants to or enter contracts with public and nonprofit private collegiate schools of nursing for projects to demonstrate and evaluate innovative nursing practice models with respect to the provision of long-term managed health care services and health care services in the home or the provision of health care services in long-term care facilities. Models demonstrated and evaluated with grants and contracts under this section shall be designed to increase the recruitment and retention of nurses to provide nursing care for individuals needing long-term care and to improve nursing care in home health care systems and nursing homes.

"(b) For grants and contracts under this section, there are authorized to be appropriated \$2,000,000 for fiscal year 1988 and such sums as may be necessary for each of the fiscal years 1989 and 1990.

"NURSE RECRUITMENT CENTERS

"SEC. 864. (a) The Secretary shall make grants to and enter into contracts with public and nonprofit private entities to develop, establish, and operate at least one and not more than regional model professional nurse recruitment centers for the purpose of recruiting individuals to enter education programs to train professional nurses. In making grants and entering into contracts under this section, the Secretary shall ensure that centers developed, established, and operated under this section include centers in rural areas.

"(b) Each center developed, established, or operated with a grant or a contract under this section shall—

"(1) conduct nursing recruitment programs directed towards—

"(A) individuals between the ages of 12 and 14 years of age;

"(B) individuals who are enrolled in high schools;

"(C) individual enrolled in colleges and universities who have not declared a major field of study; and

"(D) adults who are not in school and who may desire to enter nursing;

"(2) develop and compile resource materials concerning professional opportunities in nursing, and disseminate such mate-

rials to appropriate individuals and groups, such as community and professional organizations, hospitals, career and guidance counselors in educational institutions, and the print and broadcast media;

"(3) identify potential applicants for nursing education programs and provide information to such potential applicants on the role of the nurse and nursing education programs; and

"(4) assist individuals and organizations to establish mentor relationships between professional nurses and potential applicants for nursing education programs.

"(c) For grants and contracts under this section, there are authorized to be appropriated \$1,000,000 for fiscal year 1988 and such sums as may be necessary for each of the fiscal years 1989 and 1990.

"APPLICATION REQUIREMENTS

"SEC. 865. No grant may be made and no contract may be entered into under this part unless an application therefor is submitted to the Secretary at such time, in such form, and containing such information as the Secretary may prescribe."

IV. SECTION-BY-SECTION ANALYSIS

The bill provides that the Act may be cited as the "Nursing Shortage Reduction Act of 1987."

Section 2 of the bill amends title VIII of the Public Health Service Act (PHS) by adding at the end a new Part D—Initiatives to Reduce Nursing Shortages. The new Part D consists of new sections 861 through 865 of the PHS Act, as follows:

The new section 861 of the PHS Act as created by the bill directs the Secretary to establish a special advisory committee to develop a comprehensive plan specifying long-term solutions to the problems experienced by hospitals and other health care institutions in recruiting and retaining professional nurses. The committee would consist of representatives of professional nursing organizations, other health care professional organizations, hospitals and other health care providers, and experts in rural health care. Representatives of hospitals shall include nurses.

The new section 862 of the PHS Act directs the Secretary to make a grant to a nonprofit entity with a demonstrated record in supporting innovative health initiatives for a project to demonstrate and evaluate innovative hospital nursing practice models designed to reduce vacancies in hospital nursing positions and to make the hospital nursing position a more attractive career choice. Models demonstrated and evaluated under such a grant would have to include initiatives to—

- (1) restructure the role of the hospital nurse, through changes in the composition of hospital staffs and through innovative approaches for interaction between hospital administration and nursing personnel, in order to ensure that the particular expertise of nurses is efficiently utilized and that nurses are engaged in direct patient care during a larger proportion of their work time;

- (2) test innovative wage structure for nurses in order to—

(a) reduce vacancies in work shifts during unpopular work hours; and

(b) provide financial recognition based on experience and education;

and

(3) evaluate the effectiveness of providing benefits for nurses, such as pensions, sabbaticals, and payment of education expenses, as a means of developing increased loyalty of nurses to health care institutional and reducing turnover in nursing positions.

The Federal share of costs of the project supported with a grant under this section could not exceed 50 percent. The section authorizes appropriations of \$2 million each year for FY 1988, 1989, and 1990.

The new section 863 of the PHS Act authorizes grants to or contracts with public and nonprofit private collegiate schools of nursing for projects to demonstrate and evaluate innovative nursing practice models with respect to the provision of long-term managed health care services and health care services in the home or in long-term care facilities. Models demonstrated and evaluated under this section would be designed to increase the recruitment and retention of nurses to provide nursing care for individuals needing long-term care and to improve nursing care in home health care systems and nursing homes. The section authorizes appropriations of \$2 million for FY 1988 and such sums as may be necessary for each of FY 1989 and 1990 for such grants and contracts.

The new section 864 of the PHS Act authorizes grants to and contracts with public and nonprofit private entities to develop, establish, and operate at least one and not more than five regional model professional nurse recruitment centers for the purpose of recruiting individuals to enter education programs to train professional nurses. In making grants and entering into contracts, the Secretary shall ensure that centers developed, established, and operated under this section include centers in rural areas.

Each center developed, established, or operated with a grant or contract under this section would have to—

(1) conduct nursing recruitment programs directed towards—

(a) individuals between the ages of 12 and 14;

(b) individuals who are enrolled in high schools;

(c) individuals enrolled in colleges and universities who have not declared a major field of study; and

(d) adults who are not in school and who may desire to enter nursing;

(2) develop and compile resource materials concerning professional opportunities in nursing; and disseminate such materials to appropriate individuals and groups, such as community and professional organizations, hospitals, career and guidance counselors in educational institutions, and the print and broadcast media;

(3) identify potential applicants for nursing education programs and provide to them information on the role of the nurse and nursing education programs; and

(4) assist individuals and organizations to establish mentor relationships between professional nurses and potential applicants for nursing education programs.

The section authorizes appropriations of \$1 million for FY 1988 and such sums as may be necessary for each of FY 1989 and 1990 for nursing recruitment centers grants and contracts.

The new section 865 of the PHS Act provides that no grant may be made and no contract entered into under this part unless an application is submitted to the Secretary at such time, in such form, and containing such information as the Secretary may prescribe.

V. COMMITTEE VIEWS

Recent reports from health care facilities and organizations have indicated that our nation is currently experiencing a nursing shortage more severe and widespread than any previously reported. A recent study from the American Hospital Association reports that our nation's hospitals are having great difficulty with recruiting both new and experienced nurses to fill vacant positions. The vacancy rate for RNs more than doubled between 1985 and 1986, from 6.3 percent to 13.6 percent. In some regions of the country, notably the New England and Middle Atlantic regions, hospitals are reporting recruitment periods in excess of 90 days. Almost one-quarter of our nation's hospitals reported vacancy rates in excess of 15 percent. Vacant registered nurse positions were more likely to occur in the largest hospitals, those settings which are most likely to need the most sophisticated or highly educated nurses. In fact, 87 percent of the hospitals reported extreme difficulty with recruitment of nurses to work in intensive care units or coronary care units.

Of even greater concern for the future of health care are the current projections related to nursing school enrollments. The American Association of Colleges of Nursing reports that in the last year, enrollments in baccalaureate nursing programs decreased by 12.6 percent. Moreover, from 1984 to 1986, nursing school enrollments decreased by 17.6 percent.

A recent study completed at the University of California, Los Angeles, projects even greater drops in the next few years. The study identified career choice trends of entering college freshmen. In the last two years, the number of first-time, full-time freshmen desiring to be nurses has decreased by 33 percent. This figure projects even greater declines in actual nursing school enrollments in the next few years.

The solutions are complex because the issues causing the problems are complex. Nurses work in settings that require round the clock coverage. In many situations and relative to other professions, it is often perceived that financial rewards are not commensurate with the responsibility required of nurses; opportunities for upward mobility are lacking; work demands are increasing because of rising severity of illness; and in many settings, nurses do not participate in management decisions regarding the practice standards or support services needed for high quality care.

The result has been declining interest in nursing as career choice. The nurse shortage is threatening the quality of health care

in our Nation. New initiatives are necessary to improve working conditions for nurses in acute and long term care settings. Moreover, without intensive recruitment efforts, the problem will only increase.

ADVISORY COMMITTEE

Under this legislation, a special advisory committee would be established by the Secretary to develop a comprehensive plan which specifies long-term solutions to problems related to recruitment and retention of professional nurses. The Committee is aware that there already exists a statutory (PHS Act sec. 851) National Advisory Council on Nurse Training to advise the Secretary with respect to policy matters relating to the administration of nurse education authorities and programs under Title VIII. To capitalize on available organizational resources, the new special committee could be set up as an adjunct to, or subgroup of, the National Advisory Council, with additional expertise as appropriate. In particular, the Committee expects the new committee to include experts in rural health care as well as representatives of professional nursing organizations and other interested groups.

INNOVATIVE HOSPITAL NURSING PRACTICE MODELS

Two-thirds of all employed nurses work for hospitals. The number of nurses employed by hospitals has increased in spite of declining lengths of stay and inpatient census. Between 1979 and 1986, the number of nurses employed by hospitals increased by 26 percent while the adjusted average daily census declined by over 7 percent. There has been an increased demand for nurses because patients are more acutely ill during their shorter hospital stays. In addition, because nurses are versatile, they are often substituted for other types of providers and perform a wide range of functions including secretarial and clerical tasks, laboratory tests, pharmacy duties and other tasks not directly related to patient care.

The Committee has determined that it would be productive to explore more efficient use of nursing expertise in hospitals. This legislation would provide authorization for demonstration programs to evaluate the effect of utilizing nurses in direct patient care during a larger proportion of their work time. This may be accomplished through changes in the composition of hospital staffs primarily by using more nonclinical support services for the Registered Nurse such as secretarial, clerical and/or computer support. Demonstrations should be implemented in the areas of nursing role, career advancement, and wage and benefit structures. In evaluating the effectiveness of these demonstrations, the Committee anticipates that nurse satisfaction, recruitment/retention, and health care quality should be considered.

It is not the intent of the committee that any provision of this section of the legislation regarding "innovative wage structures" or the "restructuring of the role of the hospital nurse" be interpreted or implemented in such manner to have a detrimental effect upon an individual nurse or the nursing staff of the facility.

The committee determined that the best avenue to explore improved hospital nursing practice models was to make a public-pri-

vate partnership grant to a nonprofit private entity with a demonstrated record in supporting innovative health initiatives. The grantee would match federal funds appropriated for the study.

LONG-TERM CARE NURSING PRACTICE DEMONSTRATION

With the increase in the proportion of elderly in our population, there is an acute need for more nurses in long-term care, specifically home health care and nursing homes. The Committee believes that facilitating the liaison between schools of nursing and long-term care organizations will increase the recruitment and retention of nurses in these settings.

Under this legislation, the Secretary shall make grants to or enter contracts with public and nonprofit private collegiate schools of nursing for projects to demonstrate and evaluate innovative nursing practice models with respect to the provision of long-term care in the community or in long-term care facilities. These projects, which link schools of nursing with home health agencies and nursing homes, will involve the pooling of personnel and physical resources for the mutual benefit of both the institutions and society.

It is the intent of the Committee that these projects be based on a shared mission-statement between the academic program and the community facility which includes clinical care, education and research. Although the major focus of these projects will be on providing nursing care and educating nurses in these facilities, there should also be involvement of students from other disciplines such as medicine, social work, psychology, dentistry, optometry and public health.

These demonstrations should offer a testing ground for professional care and nurse management innovations in the area of long term care. Among the innovations to be explored should be the establishment of logical frameworks to facilitate patient movement across the health care system (between hospital, home and nursing home care) to assure appropriate placement of patients in the system. These and other health care innovations developed in this project should lead to improved education for nurses in these settings, a new understanding of care needs through clinical research and ultimately to increased recruitment and retention of nurses in these health care settings.

In the selection of these grantees, preference should be given to schools:

- with ability to pull together a consortium of hospitals, home health care agencies, nursing homes and area agencies on aging to foster comprehensive care.
- with faculty prepared in gerontological nursing and geropsychiatric nursing.
- with faculty willing to maintain joint practices between the school of nursing and home health care facilities or nursing homes.
- with ability to incorporate interdisciplinary involvement with students from a wide range of health professions including medicine, social work, psychology, dentistry, optometry and public health.

- involved in the preparation of masters level nurse specialists in geriatrics and geropsychiatric nursing.
- with a capability to provide continuing education for professional as well as nonprofessional personnel of home health agencies and nursing homes.

NURSE RECRUITMENT CENTERS

Ensuring an adequate supply of professional nurses of high calibre to care for today's patients and patients of the future is incumbent on all of us as a society. Fewer young people are choosing nursing as a profession. Equally alarming is the finding that the SAT scores of entering freshman nursing students have dropped. Clearly there is a need to increase the recruitment of the brightest and the best to the nursing profession to provide quality patient care.

The Committee intends to have nursing recruitment centers centralize the efforts of the many existing groups and organizations so that recruitment becomes more efficient, more timely, more influential and more focused. The intent would also be to have the centers reach multiple groups who influence career choices, including parents groups, schools, community groups and others. The intent would also be to have the centers operate with the nursing needs of the general public in mind and to complement and lay the foundation for recruitment efforts made by individual educational programs rather than supplant or complete with those efforts.

The recruitment centers would coordinate efforts to portray an accurate public image of the professional nurse and the responsibility the nurse bears for promoting and maintaining the nation's health.

The Committee would like to emphasize the importance of the mentorship program as part of the programs provided by the recruitment centers. Most young people who have not been hospitalized do not understand the impact the nurse has on the health care system. The Committee recognizes that career choices are highly influenced by direct contact with an admired practicing role model who conveys commitment to their work, who demonstrates that the career is meaningful to society and personally rewarding and who is supporting of the individual who is choosing the career. Thus the intent of the legislation would be to provide and increase such opportunities through personal mentorship relationships between professional nurses and potential applicants for nursing education programs. This would supplement and reinforce the print and other resource materials.

In an attempt to facilitate the recruitment of nursing personnel to rural areas, recruitment centers should include a focus on the unique health care needs of these areas. Where appropriate, recruitment committees could be developed by the recruitment centers and incorporate broad based community involvement including representatives from local government, religious groups, schools and others. The committees would be responsible for presenting the rural community in a positive light, educating about local cultural phenomena, leisure/recreational activities, and community resources. They could also be responsible for studying critical inci-

dents identified as catalysts for nurses leaving their positions in rural areas. Furthermore, the committees could engage in problem-solving with nurses regarding selected difficulties they may encounter which may lead to work- and community-related sources of dissatisfaction.

VI. COMMITTEE ACTION

S. 1402 was introduced in the Senate on June 19, 1987, and referred to the Labor and Human Resources Committee. The Committee met in executive session on July 1, 1987, and, after amendments to the original bill, agreed unanimously to report S. 1402 to the Senate.

VII. CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, July 28, 1987.

Hon. EDWARD M. KENNEDY,
Chairman, Committee on Labor and Human Resources, U.S. Senate,
Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the attached cost estimate for S. 1402, the Nursing Shortage Reduction Act of 1987, as ordered reported by the Senate Committee on Labor and Human Resources on July 1, 1987.

If you wish further details, we will be pleased to provide them.

With best wishes,

Sincerely,

EDWARD M. GRAMLICH,
Acting Director.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

1. Bill number: S. 1402.
2. Bill title: Nursing Shortage Reduction Act of 1987.
3. Bill status: As ordered reported by the Senate Committee on Labor and Human Resources on July 1, 1987.
4. Bill purposes: To amend Title VIII of the Public Health Service Act to establish programs to reduce the shortage of professional nurses.
5. Estimated cost to the Federal Government:

[By fiscal years, in millions of dollars]

	1988	1989	1990	1991	1992
Estimated authorization levels:					
Advisory Commission.....	(¹)	(¹)	(¹)	(¹)	(¹)
Nursing practice models.....	2	2	2		
Long-term care demonstrations.....	2	2	2		
Nurse recruitment centers.....	1	1	1		
Total estimated authorization level.....	5	5	5	(¹)	(¹)
Total estimated outlays.....	2	5	5	3	(¹)

¹Less than \$500,000

The costs of this bill would fall within budget function 550.

Basis of estimate.—No specific authorization level is stated in the bill for the advisory committee. Based on information for the National Advisory Council on Nurse Training, CBO estimates the cost of the committee to be about 100,000 in each fiscal year. The authorization level for nursing practice models is specified in the bill for fiscal years 1988 through 1990. The authorization levels for long-term care demonstrations and nurse recruitment centers are specified in the bill for fiscal year 1988 only. S. 1402 would provide such sums as may be necessary for these two programs in 1989 and 1990. CBO has estimated these amounts by increasing the 1988 level using the appropriate inflator. Outlays are estimated using spendout rates calculated by CBO on the basis of similar program spending data.

6. Estimated cost to state and local government: None.
7. Estimate comparison: None.
8. Previous CBO estimate: None.
9. Estimate prepared by: Carmela Dyer.
10. Estimate approved by: C.G. Nuckols (for James L. Blum, Assistant Director for Budget Analysis).

VIII. REGULATORY IMPACT STATEMENT

The Committee has determined that there will be minimal or no increase in regulatory burden of paperwork imposed by this bill.

IX. CHANGES IN EXISTING LAW

In compliance with rule XXVI paragraph 12 of the Standing Rules of the Senate, the following provides a print of the statute or the part or section thereof to be amended or replaced (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in *italic*, existing law in which no change is proposed is shown in roman.

PUBLIC HEALTH SERVICE ACT

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TITLE VIII—NURSES EDUCATION

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SECS. 820-858 * * *

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PART D--INITIATIVES TO REDUCE NURSING SHORTAGES

ADVISORY COMMITTEE

SEC. 861. The Secretary shall establish a special advisory committee to develop a comprehensive plan which specifies long-term solutions to the problems experienced by hospitals and other health care institutions in recruiting and retaining professional nurses. Such committee shall consist of representatives of professional nursing organizations, other health care professional organizations, hospitals and other health care providers, and experts in rural health care.

Representatives of hospitals and other health care providers on such committee shall include nurses.

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(1) restructure the role of the hospital nurse, through changes in the composition of hospital staffs and through innovative approaches for interaction between hospital administration and nursing personnel, in order to ensure that the particular expertise of nurses is efficiently utilized and that nurses are engaged in direct patient care during a larger proportion of their work time;

(2) test innovative wage structures for nurses in order to—

(A) reduce vacancies in work shifts during unpopular work hours; and

(B) provide financial recognition based upon experience and education; and

(3) evaluate the effectiveness of providing benefits for nurses, such as pensions, sabbaticals, and payment of educational expenses, as a means of developing increased loyalty of nurses to health care institutions and reducing turnover in nursing positions.

(b) The Federal share of the costs of the project supported with a grant under this section shall not exceed 50 percent.

(c) For a grant under this section, there are authorized to be appropriated \$2,000,000 for each of the fiscal years 1988, 1989, and 1990.

LONG-TERM CARE NURSING PRACTICE DEMONSTRATION

SEC. 863. (a) The Secretary shall make grants to or enter contracts with public and nonprofit private collegiate schools of nursing for projects to demonstrate and evaluate innovative nursing practice models with respect to the provision of long-term managed health care services and health care services in the home or the provision of health care services in long-term care facilities. Models demonstrated and evaluated with grants and contracts under this section shall be designed to increase the recruitment and retention of nurses to provide nursing care for individuals needing long-term care and to improve nursing care in home health care systems and nursing homes.

(b) For grants and contracts under this section, there are authorized to be appropriated \$2,000,000 for fiscal year 1988 and such sums as may be necessary for each of the fiscal years 1989 and 1990.

NURSE RECRUITMENT CENTERS

SEC. 864. (a) The Secretary shall make grants to and enter into contracts with public and nonprofit private entities to develop, es-

establish, and operate at least one and not more than five regional model professional nurse recruitment centers for the purpose of recruiting individuals to enter education programs to train professional nurses. In making grants and entering into contracts under this section, the Secretary shall ensure that centers developed, established, and operated under this section include centers in rural areas.

(b) Each center developed, established, or operated with a grant or a contract under this section shall—

(1) conduct nursing recruitment programs directed towards—

(A) individuals between the ages of 12 and 14 years of age;

(B) individuals who are enrolled in high schools;

(C) individuals enrolled in colleges and universities who have not declared a major field of study; and

(D) adults who are not in school and who may desire to enter nursing;

(2) develop and compile resource materials concerning professional opportunities in nursing, and disseminate such materials to appropriate individuals and groups, such as community and professional organizations, hospitals, career and guidance counselors in educational institutions, and the print and broadcast media;

(3) identify potential applicants for nursing education programs and provide information to such potential applicants on the role of the nurse and nursing education programs; and

(4) assist individuals and organizations to establish mentor relationships between professional nurses and potential applicants for nursing education programs.

(c) For grants and contracts under this section, there are authorized to be appropriated \$1,000,000 for fiscal year 1988 and such sums as may be necessary for each of the fiscal years 1989 and 1990.

APPLICATION REQUIREMENTS

SEC. 865 No grant may be made and no contract may be entered into under this part unless an application therefor is submitted to the Secretary at such time, in such form, and containing such information as the Secretary may prescribe.

